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| PLANT PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small> | | Attorney Docket No. 2475-040292 | |
|--|--|---|--------------|
| | | First Inventor Anton Sonnenberg | |
| | | Title Mushroom Variety Named 'BRONCOH' | |
| | | Express Mail Label No. EL 653126653 US | |
| APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small> | | ADDRESS TO: Mail Stop Plant Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 | |
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 9] <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings <i>(if filed)</i>- Detailed Description- Claim(s)- Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2]</p> <p>5. Oath or Declaration [Total Pages 2]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i></p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i></p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p> | | ACCOMPANYING APPLICATION PARTS | |
| | | 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) | |
| | | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> | |
| | | 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> | |
| | | 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations | |
| | | 13. <input type="checkbox"/> Preliminary Amendment | |
| | | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> | |
| | | 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> | |
| | | 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | |
| | | 17. <input checked="" type="checkbox"/> Other: Express Mail Certificate; checks for \$530.00 and \$40.00. | |
| <p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: ____/____</p> <p>Prior application information: Examiner _____ Art Unit: _____</p> <p>For CONTINUATION or DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> | | | |
| 19. CORRESPONDENCE ADDRESS | | | |
| <input checked="" type="checkbox"/> Customer Number: | | 28289 <small>(Insert Customer No. or Attach bar code label here)</small> | |
| | | OR <input type="checkbox"/> Correspondence address below | |
| Name | Russell D. Orkin Webb Ziesenheim Logsdon Orkin & Hanson, P.C. | | |
| Address | 700 Koppers Building 436 Seventh Avenue | | |
| City | Pittsburgh | State | PA |
| Zip Code | 15219 | | |
| Country | United States | Telephone | 412-471-8815 |
| | | Fax | 412-471-4094 |
| Name (Print/Type) | Patricia A. Olosky | Registration No. (Attorney/Agent) | 53,411 |
| Signature | <i>Patricia A. Olosky</i> | Date | May 19, 2004 |

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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19587 U.S. PTO
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FEE TRANSMITTAL
for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$570.00)**Complete if Known**

| | |
|----------------------|------------------|
| Application Number | Not Yet Assigned |
| Filing Date | Herewith |
| First Named Inventor | Anton Sonnenberg |
| Examiner Name | Not Yet Assigned |
| Art Unit | Not Yet Assigned |
| Attorney Docket No. | 2475-040292 |

METHOD OF PAYMENT (check all that apply)☒ Checks ☐ Credit Card ☐ Money Order ☐ Other ☐ None☐ Deposit Account:

Deposit Account Number 23-0650

Deposit Account Name

The Director is authorized to: (check all that apply)
☐ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1001 | 770 | 2001 | 385 | Utility filing fee | |
| 1002 | 340 | 2002 | 170 | Design filing fee | |
| 1003 | 530 | 2003 | 265 | Plant filing fee | \$530.00 |
| 1004 | 770 | 2004 | 385 | Reissue filing fee | |
| 1005 | 160 | 2005 | 80 | Provisional filing fee | |

SUBTOTAL (1) (\$530.00)**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

| Total Claims | | Independent Claims | | Multiple Dependent | | Extra Claims | | Fee from below | | Fee Paid | |
|--------------|---------|--------------------|---|--------------------|--|--------------|---|----------------|--|----------|--|
| 3 | -20** = | 0 | X | | | 0 | X | | | 0 | |
| 3 | -3** = | 0 | X | | | | | | | 0 | |

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|---|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 | |
| 1201 | 86 | 2201 | 43 | Independent claims in excess of 3 | |
| 1203 | 290 | 2203 | 145 | Multiple dependent claim, if not paid | |
| 1204 | 86 | 2204 | 43 | **Reissue independent claims over original patent | |
| 1205 | 18 | 2205 | 9 | **Reissue claims in excess of 20 and over original patent | |

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

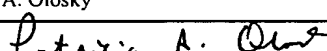
| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 1053 | 130 | 1053 | 130 | Non-English specification | |
| 1812 | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 | 110 | 2251 | 55 | Extension for reply within first month | |
| 1252 | 420 | 2252 | 210 | Extension for reply within second month | |
| 1253 | 950 | 2253 | 475 | Extension for reply within third month | |
| 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month | |
| 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month | |
| 1401 | 330 | 2401 | 165 | Notice of Appeal | |
| 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | |
| 1403 | 290 | 2403 | 145 | Request for oral hearing | |
| 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | |
| 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | |
| 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | |
| 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) | |
| 1502 | 480 | 2502 | 240 | Design issue fee | |
| 1503 | 640 | 2503 | 320 | Plant issue fee | |
| 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | \$40.00 |
| 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) | |
| 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | |
| 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | |

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$40.00)**SUBMITTED BY**

(Complete if applicable)

| | | | | | |
|-------------------|---|-----------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Patricia A. Olosky | Registration No. (Attorney/Agent) | 53,411 | Telephone | 412-471-8815 |
| Signature |  | | | Date | May 19, 2004 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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051904

PLANT PATENT APPLICATION
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | |
|-----------------------|--------------------------|
| IN RE APPLICATION OF: | ATTORNEY'S DOCKET NUMBER |
| Anton Sonnenberg | 2475-040292 |

ENTITLED

Mushroom Variety Named 'Broncoh'

MAIL STOP PLANT PATENT APPLICATION
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

EXPRESS MAIL CERTIFICATE

"Express Mail" Label Number EL 653126653 US

Date of Deposit May 19, 2004

I hereby certify that the following enclosed papers or fees:

Specifications, Claims and Abstract;
Two (2) Sheets of drawings in duplicate;
Declaration and Power of Attorney;
Patent Application Transmittal Letter (original and two (2) copies);
Recordation Form Cover Sheet-Patents Only;
Assignment (1 p.); and
Checks in amount of \$530.00 for filing fee and \$40.00 for Assignment recordation fee

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Florence P. Trevethan
(Typed name of person mailing paper or fee)

Florence P. Trevethan
(Signature of person mailing paper or fee)